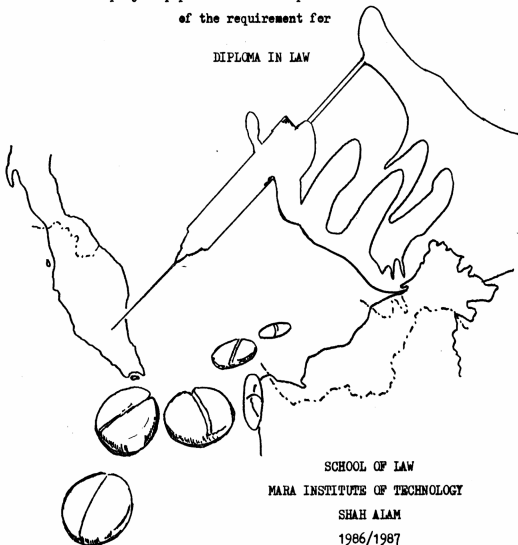


TREATMENT AND REHABILITATION OF DRUG DEPENDANTS
AND APPLICATION OF
THE
"DRUG DEPENDANTS (TREATMENT AND REHABILITATION) ACT, 1983"

by
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PREFACE

This project paper was written to study the developments and causes of drug dependency, its treatment and rehabilitation and the application of the Drug Dependants (Treatment And Rehabilitation) Act (DDTRA), 1983, in carrying out the programme of treating and rehabilitating known drug dependants either in Governmental or Private Centres as authorised in the Act.

From 1970 to 1983, some 93618 persons have been identified as drug dependants. The number in 1980 were 7154 new cases, 10391 in 1981, 13363 in 1982 and 14624 in 1983. Up to the time this paper was written the number known to have accumulated from 1970 to 1986 was 121145.

Due to the ineffectiveness of treatment and rehabilitation of drug dependants under the Dangerous Drugs Act (DDA) 1952 a new Act, the DDTRA 1983 was enacted in order to provide a more effective and comprehensive treatment and rehabilitation programme. The responsibility initially vested to the Ministry of Social and Welfare Services in 1975 was then taken over by the Ministry of Home Affairs.

SCOPE

In this brief exercise, attention will be focussed on the treatment and rehabilitation of drug dependants, including traditional cure. The writer will begin by making a study on the historical developments of drugs and its effects in Chapter 1. In Chapter 2 he will cover drugs and its effect. Chapter 3 will highlight the causes to drug dependency. Chapter 4 will elaborate on treatment and rehabilitation programme including activities in the One Stop Centre (Pusat Serenti), government strategies and financial commitments for the programme. Chapter 5 will then discuss on the appli

eation of the DDTRA 1983 and, in the concluding Chapter the shortcomings of the DDTRA 1983 will be identified and commented and recommendations be put forward.

LIMITATION

Due to time constraint and ill-health, the writer was unable to make any visit to the Rehabilitation Centres. However, by basing on past knowledge of a one month stay at the Help Centre in Batu Cajah, and facts gathered through numerous means this paper was duly completed.

METHODOLOGY

The material for this paper was obtained in the following modes:

1. STATISTICS

- a. Anti Narcotic Task Force, Jalan Duta.
- b. Anti Narcotic Branch, Police Headquarters, Bukit Aman.
- c. Treatment and Rehabilitation Division, Ministry of Home Affairs.

2. INTERVIEWS

- a. Staffs of agencies in para 1.
- b. Drug dependants and former residents of rehabilitation centres, around Kuala Lumpur area.
- c. Chinese old folks in Teluk Intan.
- d. Traditional 'Bomoh'.

3. SUPPLEMENTARY MATERIALS

- a. Textbooks.
- b. Documented materials.
- c. Magazines and newspapers.

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3. Insp Tang Yoot Leng of Anti Narcotic Branch, Police Headquarters, Bukit Aman.
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5. Staffs of the National library.
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GENERAL

DRUG ABUSE takes many forms and involves different kinds of substances. It is not an easy term to define. In one instance drug abuse refers to the consumption without medical authorisation of medically useful drugs which have the capacity of altering mood and behaviour. In another, it also refers to the ingestion of a medically useful mood, altering drug for a purpose other than that for which it was prescribed, meaning a person who has been prescribed a barbiturate for insomnia but who has used it at a party is abusing drugs. Drug abuse also describes any use, except for medical research, of mind-changing drugs and substances having no legitimate medical application. Anyone who smokes or takes marijuana or Lysergic Acid Diethylamide (LSD) is abusing drugs, and anyone who uses heroin or morphine is a drug abuser.

In general, drug abuse can be described as an effort by individuals to feel differently from what they do, and the resulting action leads to a state called drug dependence, earlier referred to as addiction or habituation. For years the term addiction has been reserved for drugs causing physical dependence and the term habituation has been applied to drugs which produce psychological dependence. The World Health Organisation (WHO) recommended scrapping both addiction and habituation in favour of a more general term, 'drug dependence' because it will apply to all types of drug abuse¹. Drug dependence is described as a state, physically or psychologically arising from repeated administration of a drug in a periodic or continuous basis.

In recent decades the drugs boom was seen as a one way traffic to the West, buffered by the opium poppy and the coca leaf of the developing world. Now it is a two way trade, with the rising problems of so called mood shaping drugs by compounds manufactured on a massive scale, largely in the great